

4244



# FIRST NEWFOUNDLAND REGIMENT

## ATTESTATION OF

No. 4044 Name Harold Bradshaw Corps Mk

### Questions to be put to the Recruit before Enlistment.

- |  |                                      |
|--|--------------------------------------|
| 1. What is your name? .....  | 1. <u>Harold Bradshaw</u>            |
| 2. What is your full Address? .....  | 2. <u>Parquet Street, St. John's</u> |
| 3. Are you a British Subject? .....  | 3. <u>Yes</u>                        |
| 4. What is your age? .....   | 4. <u>28</u> Years <u>2</u> Months   |
| 5. What is your Trade or Calling? .....  | 5. <u>Signerman</u>                  |
| 6. Are you Married? .....  | 6. <u>No</u>                         |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? .....                             | 7. <u>No</u>                         |
| 8. Are you willing to be vaccinated or re-vaccinated? .....  | 8. <u>Yes</u>                        |
| 9. Are you willing to be enlisted for General Service? .....   | 9. <u>Yes</u>                        |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?....                                       | 10. { Name .....                     |
|  | { Corps .....                        |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? ..... | 11. <u>Yes</u>                       |

I, Harold Bradshaw do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements made.

9/31-10-17 Harold Bradshaw SIGNATURE OF RECRUIT.  
R. Edward Signature of Witness.

### OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Harold Bradshaw do make oath, that I will be faithful and bear true allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will, as in duty bound, honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity against all enemies, according to the conditions of my service.

### CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

The Recruit above named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.  
The above questions were then read to the Recruit in my presence.  
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me at St. John's on this 31 day of Oct 1917.  
Signature of Attesting Officer W. J. [Signature]

### †CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the 1st.  
If enlisted by special authority, such will be attached to the original attestation.  
Date 31-10-17 1917  
Place St. John's } Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.  
‡ Here insert the "Corps" for which the Recruit has been enlisted.

\* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name).....re-enlisted in the (Regiment).....on the (Date).....

# DESCRIPTIVE REPORT ON ENLISTMENT

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name Harold Haslam  
 Apparent age 28 years 2 months. Height 5 feet 3 inches  
 Chest Measurement { Girth when fully expanded 35 1/2 inches  
 Range of expansion 3 1/2 inches  
 Distinctive marks \_\_\_\_\_

## INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Erhel Haslam  
Maguel Street Stou | Relationship Sister  
 Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage. (c) Present address. (d) Initials of Officer verifying entry.			
(a)	(b)	(c)	(d)

### Particulars as to Children

Christian Names	Date and Place of Birth

## STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from <u>31-10-17</u>									
Joined at <u>St. John's</u> on <u>October 31-17</u>									
Discharged <u>July 12, 1919</u>									
<u>Embarked St John's S. Messanatic</u>					<u>11-12-17</u>	<u>7</u>	<u>Embarked for B. E. F. 25 5/8</u>		
<u>Embarked 3 Scottish Light Infants</u>					<u>31-12-17</u>	<u>1</u>	<u>Embarked France</u>		<u>27-5-18</u>
<u>Joined Batten</u>					<u>31-5-18</u>	<u>18</u>	<u>transferred from Reserve</u>		<u>22-4-19</u>
<u>to Newfoundland for Demobilization</u>					<u>22-5-19</u>	<u>1</u>	<u>Arrived Newcastle</u>		<u>23-4-19</u>
<u>Demobilization St John's</u>					<u>12-7-19</u>				
Total Service forfeited as above.....									

Total Service towards Engagement to 12-7-19 (date of discharge) 1 years 255 days  
 " " Pensions " [ " " ] " " "

C.R. 4044

Extract from Daily Orders Part 11 Unit The Royal F.M.  
St. John's, July 16th, 1919.

The discharge of the undernoted on demobilization has been  
CONFIRMED by Officer i/o Records from 19-7-19.

4044 Pte. Harold Fradsham.



C.R. 4044

Extract from Daily Orders Part 11 Unit The Royal WFLA.

Regt. St. John's, June 19th, 1919.

The discharge of the undernoted on demobilization has been  
APPROVED by O.C. Discharge Depot with effect from 25-6-19.

4044 Pte. H. Fradsham.

C.R. 4044

Extract from Daily Orders Part II Depot, St. Johns,

Date June 18th 1919.

4044, Pte. H. Fradsham.

Reported at Headquarters 1/6/19. ex "Corsican"  
which sailed Liverpool May 22/1919.

C.R.

4044

Extract from Nominal Roll from 1st. Battalion  
Royal Newfoundland Regiment dated 30-4-19.

The undermentioned of the 1st. Battalion left  
Rouen Camps 22/4/19, embarked at Havre 22/4/19,  
disembarked at Southampton 23/4/19 and reached  
Hazeley Down Camp 23/4/19.

#4044 Pte. H. Fradsham



C.R. 4044

Extract from Nominal Roll of Draft No.46 Hfld. Regt.  
From 2nd Bn. Depot, to 1st Bn. B.E.F. Embarked Folkestone,  
25-5-18.

4044 Pte. H. Fradshaw

C.R. 4044

NEWFOUNDLAND CONTINGENT.

Extract of Nominal Roll of Draft No. 46, - 100 Other Ranks from 2nd. Bn.  
Depot, Winchester, to 1st. Batta., The Royal Newfoundland Regiment, B.E.F.  
Embarked Folkestone, 25/5/18.

4044 Pte. H. Fradsham.

A. Fo. B. 103 (one for each  
soldier) sent to 3rd. Echelon  
B.E.F.



C.R. 4044

Extract of Telegram received from London, dated  
January 4th, 1918.

#4044 Pte. Fredshat.

Suffering from  
Mumps. Admitted 3rd Scottish General Hospital,  
Glasgow from "Missenabie" December 31, 1917.

C.R.

4044

Extract from Casualties received from Pay and  
Record Office, London dated January 4th., 1918.

---

*Admitted*

To 3rd. Scottish General Hospital, Stobhill, Glasgow  
31/12/17.

---

The u/m was admitted from H.M.S. "Hissanable"  
on arrival at Glasgow Docks on 31/12/17.

---

4044 Pte. H. Fredsham.

Trumps

C.R. 4044

**RONALD HOLL**  
Extract from **GENERAL** embarked St. John's for Overseas Dec. 11th 1917  
Per **S.S. FLORISSEL.**

---

#4044 PTE. H. FREDSHAM.



C.R. 4044

Extract from Daily Orders Part 11 Unit The Royal Hfld.  
Regt., St. John's, Oct. 31st, 1917.

4044 Pte. F. Fradsham.

Attested for General Service with the 1st Hfld. Regt.,  
with effect from Oct. 31st, 1917.

Fredsham, H

4044

Hay Sept





Receipt for Army Book 64

No. .... 4044 Name *Gradshaw, H.* .....

To Certify that I have received the AB 64 of the above  
named soldier.

Name *Harold Gradshaw* .....

Date *aug 4th / 1920* .....

Place *pacquet St. Barbe* .....

N.B. For completion and return to the Department of Militia  
insert in corner of envelope "AB 64"

# Squadron, Troop, Battery and Company Conduct Sheet.

Army Form B. 121.

Forms  
B. 121  
39

Number of Sheet one

Regiment of 1<sup>st</sup> Newfoundland

Signature of O. C. Company W. H. H. H.

Regimental No. and Name	
No.	<u>4044 Fredslam H.</u>
Joined	Date
Joined	Date
Joined	Date
Joined	Date

Enlistment	
Age on	<u>28 years 2 months</u>
Place and Date of Enlistment	<u>St. Johns 31-10-17</u>
Period of	with Colours <u>255</u> years.
	with Reserve <u>365</u> years.

Trade	<u>Fisherman</u>
Religion	<u>Ch. M.</u>
Place of Birth	

Good Conduct Badges, Service pay or proficiency pay

Place	Date of Offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
				<u>Demobilized St. Johns, 12/79</u>					

To be carried over

Army Form B. 121

The Royal Nfld. Regiment

DEMOBILIZATION

No. 4044 Rank

Name Jordhane

Warned for demobilization on

JUN 14 19



Reg. No. 4044 Rank Pls Name Fordham J

Attested 31-10-17 Address Paguet French Shore.

Allotment 604 Allotee Ethel J Fordham Lister

Date of Allotment 1-11-17 Returned from Overseas \_\_\_\_\_

Embarked for Overseas 11-12-17 Cause \_\_\_\_\_

Vac. 3-11-17 Innoc 1st 29-11-17 20th 6-12-17  
N.L. 16-11-17 to 26-11-17 R.Via 30-11-17

Reg. No. *40 44* Rank *Pt* Name *Franshaw H.*

Attested ..... Address *Hacquette*

Allotment ..... Allottee .....

Date of Allotment ..... Returned from Overseas *28-5-19*

Returned on S.S. *Corsican* Cause *Discharge*

*14-6-19* PASSED TO DEMOBILIZATION OFFICER

*28.6.19* DISCHARGE APPROVED ON DEMOBILISATION

44044

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No 44044 Rank Cpl Name Godsham A.  
 Date of Enlistment 31-10-17 Address Paquet District H. Baha  
 Occupation Fisherman Classification for Discharge 4 Medical Category 171  
 Recommendation S.M.B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. P136	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 14-5-19 H. Mins H  
 O. C. Discharge Depot.

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am \_\_\_\_\_ in a position to resume civilian occupation.

A. Godsham

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$ 60.00
- (b) Clothing Supplied knaw caps

Date 14-6-19 O i.c. Re-clothing



**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. 9728 to his home at Priguet and Release Certificate No. 2758 issued.

Date 14-6-19 *J.A. Snowball*  
Demobilization Officer

**4. Pay and Allowances.**

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to

Date 14-6-19 *J.A. Snowball*  
Depot Paymaster.

Discharge approved for 28-6-19  
Forwarded with following documents to O.C. Discharge Depot.

N.F. P36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

*2 Form B*

Date 14-6-19 *J.A. Snowball*  
O. C. Discharge Depot.

**APPROVED.**

Documents as above forwarded to:—

- Officer in Records.
- Board of Pension Commissioners.

with following additional documents.

JUN 28 1919

Eligible for War Service Gratuity

Date July 10/19 *R.H. Sait*  
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.  
Date July 10/19 *Amelkathoff*



## Descriptive Return of a Soldier Discharged on Account of Disability

**INSTRUCTIONS**—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i. c. Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Harold Judson*

Regiment from which discharged **Royal Newfoundland**

Regimental number *21044*

Intended address *Paquet, French Shore*

Height on discharge *5* Feet *4*

Color of hair on discharge *Dark Brown*

Complexion *Fair*

Color of eyes *Grey*

Descriptive Marks *—*

Figure on discharge *medium*

Christian name of Father *—*

Christian name of Mother *—*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Bay Roberts, Dec 25, 1893*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct

(Soldier's signature in full) *Harold Judson*

*Pt*  
(Rank)

Station

Date *13.6.19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

Medical Officer i/c Hospital.  
Unit, or Command Depot.

Station

Date

# The Royal Newfoundland Regiment

## PROCEEDINGS ON DISCHARGE

1. No. 4044 Rank Pte Name Fredham H  
 Intended place of residence Raquelet St Barbe

2. Occupation Dishwasher  
 Classification of soldier 2 Medical Category HI

3. The above named man is discharged in consequence of DEMobilization  
Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.  
 Place ST. JOHN'S  
 Date JUN 14 1919 Jr Commanding Discharge Depot  
 The Royal Newfoundland Regiment

### CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.  
 Place and date ST. JOHN'S H. Fredham  
JUN 14 1919 Signature of soldier  
J. A. [Signature] Signature of witness

### CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.  
 Place and Date ST. JOHN'S H. Fredham  
JUN 14 1919 Signature of soldier  
W. J. [Signature] Signature of witness

### STATEMENT OF SERVICE

7. Enlisted for service 31.10.17 No of days on Military  
 Discharged from service 28.6.19 PLUS 14 DAYS Service 620

### APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer i/c Records, The Royal Newfoundland Regiment, twenty-eight days from date.  
 Place ST. JOHN'S R. H. [Signature] Major  
 Officer Commanding Discharge Depot  
 The Royal Newfoundland Regiment.  
 Date JUN 28 1919

### CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.  
 Place A. [Signature] M. [Signature]  
 Date July 13/1919 [Signature]  
 Officer i/c Records  
 The Royal Newfoundland Regiment

*a 2 Bro 79/79 85*



July 12, 1919

#4044 Pte. Harold Fredsham,

Paquet,

St. Barbe.

Dear Sir:-

Please find enclosed Discharge Certificate #2985.

Yours truly

Captain,  
Raymaster & O.i/o Records.



July 12, 1919

#4044 Pte. Harold Fradham,

Paquet,

St. Barbe Dist.

Dear Sir:-Referring to your application I enclose cheque for  
Seventy dollars (\$70.00), being amount of first payment due  
you on account of the War Service Gratuity.

Yours truly

Captain,  
Paymaster & O. i/c Records

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

A complete reply must be given to every question in this Declaration There must be no blanks and no dashes, if any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE OFFICER I/C RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name *J. Farrell* 2. Surname *Fradsbam*

3. Rank *Pvt.* 4. Regtl. No. *404th*

5. Address in full to which future payments of gratuity are to be forwarded *Paquette, St Barbe*

6. Date of enlistment in the Regiment *Sept. 15/17*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....

8. Relationship of such dependents.....

9. Address in full of such dependents.....

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....

11. Were you on active service only in field, if so, give dates and particulars of such service..... *Overseas*

12. Give total length of time which you served on active service, whether in field or overseas..... *From Sept 15/17 to*

*June 14/19*..... 1.

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

..... *No* .....

14. Have you already received any payment of Post Discharge pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.....

.....

15. Have you been issued with a War Service Badge?..... *No* .....

16. Have you, during the present war, served in the Imperial Forces. *No*

17. Are you entitled to receive, or have you received any Gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No* .....

18. Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?..... *No* .....

(b) If so, was such reversion in consequence of Misconduct or inefficiency?.....

19. Are you now serving in the Regt.?..... *No* ..... If not give:- (a) date of discharge *June 14/19* (b) Reason for discharge.....

..... *Temporary* *De-mobilization* .....

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places, and dates of such service....

*France, Belgium & Germany - From Apr. 1918 to Apr. 1919* .....

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee..... *No* .....

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under Oath.



*Harold Bradshaw*

Signature of Applicant:

Place of Residence:

Declared before me at:

This

*14th*

day of

*Acqueduct, St Barbé, Detroit  
St Johns, Mich.  
June 1919  
John P. Carthy*

1919

Signature of Barrister of the  
Supreme Court, Stipendiary Magistrate,  
Notary Public, Justice of the Peace,  
or Commissioner of affidavits.

POST DISCHARGE PAY.

Date paid

Soldier

Dependent

War Service  
Clasality.

Net amount due

Date paid	Soldier	Dependent	War Service Clasality.	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified correct.

Paymaster



# The Royal Newfoundland Regiment

Class for Demobilization:

*7*

Report of Demobilization  
Travelling Board, held on soldier for  
discharge.

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

*13.6.19*

Regimental No

*4044*

Name

*Frodolain H.*

Rank

Address

*Pacquet*

Present Medical Category

*A i*

Recommended for:—

(a) Immediate discharge

(b) Standard Medical Board

Members of Board

*R.H. East Capn*

O.C. Discharge Depot.

*Paton*

Senior Medical Officer

*J.W. Burden*

M. O. Depot

# The Royal Newfoundland Regiment

## DEMOBILIZATION OF

Reg. No. 4044 Rank Pte Name Fredsham A  
 Date of Enlistment 31-10-17 Address Paquet District H Berlin  
 Occupation Fisherman Classification for Discharge E Medical Category 17.1  
 Recommendation S. M. B. \_\_\_\_\_ Disability Rating \_\_\_\_\_

Passed to Demobilization Officer with following documents:—

N.F. 1)36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 14 5 19 O. C. Discharge Depot. H Berlin

### PARTICULARS FOR DEMOBILIZATION

#### 1. Civil Re-Establishment.

I am \_\_\_\_\_ in a position to resume civilian occupation.

N. Fredsham

Particulars passed to Vocational Officer for information and action.

Date \_\_\_\_\_

#### 2. Clothing.

Certified that Clothing Regulations have been complied with:—

(a) Clothing Allowance payable \$60

(b) Clothing Supplied \_\_\_\_\_

N. Fredsham

Date 14-6-19

O i/c. Re-clothing

**3. Transportation and Release Certificate.**

The above named has been provided with Travelling Warrants No. 9728 to his home at Paguet and Release Certificate No. 2758 issued.

Date 14-6-19 *J.A. Snowball*  
Demobilization Officer

**4. Pay and Allowances.**

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to 12-7-19

Date 14-6-19 *J.A. Snowball*  
Depot Paymaster.

Discharge approved for 28-6-19  
Forwarded with following documents to O.C. Discharge Depot.

N.F. P/36	B 268	B 121	N.F. Med	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B179c	B 120	M 93		

*2 Form B*

Date 14-6-19 *J.A. Snowball*  
O. C. Discharge Depot.

**APPROVED.**

Documents as above forwarded to:—

Officer in Charge Records.  
Board of Pension Commissioners.

with following additional documents.

**Eligible for War Service Gratuity**

Date JUN 28 1919 *R.H. Sait Capt.*  
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date .....



# Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

*To resume former occupation*

*H. Bradshaw*

Signature of Man.

Reg. No. *4044*

*J. A. [unclear]*

Signature of the Vocational Officer or his Representative.

**ST. JOHN'S**

Place

Date *14-6-19*

191



To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

# MEDICAL HISTORY

Surname Fredsham OF Christian Name Harold.

Table I.—GENERAL TABLE.

Birthplace:—Parish Paquet Street Mon County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	Right	Left	Right	Left
Examined	on 31 day of Oct. 1917	at St. Johns.	on day of	191
Declared Age	28 years	2 Weeks	years	days
Trade or Occupation	Fisherman			
Height	5 feet	3 inches	feet	inches
Weight	124 lbs.			lbs.
Chest Measurement	33 1/2 inches			inches
	3 1/2 inches			inches
Physical Development				
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=	6/6	R.E.—V=	
	L.E.—V=	6/6	L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lambert Peterson</u>			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at St. Johns	on 31 day of Oct. 1917	at	on day of 191
Joined on Enlistment	Corps.	Regtl. No.	Corps.	Regtl. No.
Transferred to	1st Nfld Regt. 4044			
Became non-effective by	on day of 191		on day of	191
(Signature)				
(Rank)				

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer	
	Day	Month	Year	Day	Month	Year					
3rd SCOTTISH GENERAL	31	12	14	21	1	18	28	Mumps.	22	Admitted direct to Civil Isolation Hospital, <sup>Belfast</sup> Glasgow from H. M. T. Meserian. 31-12-14 Revised.	A. Warrington Capt





**Casualty Form - Active Service.**

Regiment or Corps *21. Royal Newfoundland*  
 Rank *Plt* Surname *Trudsham* Christian Name *Harold*  
 Religion *Meth* Age on Enlistment *25* years *2* months  
 Enlisted (a) *31.10.17* Terms of Service (a) *Duration* Service reckons from (a) *31.10.17*  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 Occupation *Fisherman* *J. W. Emerson* of Corps Trade and rate .....  
 Occupation *Fisherman* *J. W. Emerson* Signature of Officer



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.35, or other official documents.
Date	From whom received				
			Embarked ... <i>25-5-18</i>		
			Disembarked ... <i>27-5-18</i>		
			<i>Joined Battalion 31-5-18</i>		
			<i>Returned in UK</i>	<i>93/4/19</i>	

*Int*

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shoeing Smith, &c. W 5945 512733 20.0m 9/17 (35011) C. P. & S. Ltd., Form B.103 E/1907. P.T.O.



**Medical Report on an Invalid.**

Station Hazely Down  
 Date 1-5-19

- |                      |  |   |
|----------------------|--|---|
| 1. Unit              | <u>Royal Newfld</u>                              | 7. Former Trade } <u>Fisherman</u><br>or Occupation } |
| 2. Regimental No.    | <u>4044</u>                                      | 7A. If with previous service in Army, state—          |
| 3. Rank              | <u>Pte</u>                                       | (a) Former Unit;                                      |
| 4. Name              | <u>Gradsham, N.</u>                              | (b) Regimental No.;                                   |
| 5. Age last birthday | <u>26.</u>                                       | (c) Date of Discharge;                                |
| 6. Enlisted          | { on <u>Sept. 15. 1917</u><br>at <u>St Johns</u> | (d) Cause of Discharge.                               |

**8. Disability in respect of which invaliding is Proposed.**

(Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- |   |                          |
|---|--------------------------|
| 9. Date of origin of disability.  | <u>nil</u>               |
| 10. Place of origin of disability.  | <u>nil</u>               |
| 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. | <u>nil</u><br><u>nil</u> |

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).
  - (b) constitutional or hereditary, and not aggravated by service during the present war.
  - (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

h.d.

13. What is his present condition?

*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*

*He complains of no disability*

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
  - (b) Where?
  - (c) Opinion?

16. Was an operation performed? If so, what?

*na*

17. If not, was an operation advised and declined?

*na*

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

*na*

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

*na*

*Repatrication*

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

*W. E. Procnier. Capt. R.A.M.C.*

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *S. D. Caen*

\_\_\_\_\_  
Officer in charge of Hospital.

Date *2. 5. 19*

\*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.



# 1st Newfoundland Regiment

HEADQUARTERS

St John's, Newfoundland,

Jan. 16th. 1917.

16  
Pay office,  
Colonial Building

Herewith Cancellation of Allotment Form K  
No. 3771. ~~and~~ enclosed New allotment Form  
K No. 3866.

Chas. R. App. Capt.  
Newfoundland Regt.





Fredsham, H.

C.R. 4044

P. J. R. D.





Medical Report on an Invalid.

Station Hoylyst Camp  
 Date 2. 5. 19

1. Unit Royal Newfed  
 2. Regimental No. 40 44  
 3. Rank Pte.  
 4. Name Fradsbam N.  
 5. Age last birthday 26  
 6. Enlisted { on Sept. 13. 1914  
 at St John
7. Former Trade } Fisherman  
 or Occupation }  
 7A. If with previous service in Army, state—  
 (a) Former Unit;  
 (b) Regimental No.;  
 (c) Date of Discharge;  
 (d) Cause of Discharge.

8. Disability in respect of which invaliding is Proposed.  
 (Other disabilities should be reported upon in answer to question No. 19).

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.  
 10. Place of origin of disability.  
 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

nil  
nil  
nil

12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—  
 (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3).  
 (b) constitutional or hereditary, and not aggravated by service during the present war.  
 (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

} no

13. What is his present condition?

*No Complaints of no disability.*

*Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.*

14. If the disability is an injury, was it caused—

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—
- (a) When?
  - (b) Where?
  - (c) Opinion?

16. Was an operation performed? If so, what?

*na*

17. If not, was an operation advised and declined?

*na*

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

*na*

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

*na*

*Repatrication*

20. Do you recommend—

- (a) Discharge as permanently unfit, or
- (b) Change to England?

*W.E. Proctor. Capt R.A.M.C.*

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except †

Station *H. Camp*

Officer in charge of Hospital.

Date *2. 5. 19*

\*Loss of teeth on or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

